Health Care Costs and Resource Use Associated with Sequelae and Comorbidities in Patients with Chronic HCV


1 Bristol-Myers Squibb, Plainsboro, NJ, USA; 2 Mu Sigma, Northbrook, IL, USA

Borns Sikh, Ph.D.
Borns.Sikh@bms.com

BACKGROUND

- Patients with chronic HCV incur substantial health care utilizations and costs due to sequelae and comorbidities.
- Understanding costs and resource use associated with sequelae and comorbidities may help to inform treatment and health care coverage decisions.
- Healthcare resource utilization and costs for the U.S. are often estimated using retrospective administrative claims databases, given the small sample size available for studies of chronic HCV.

METHODS

- Baseline and outcomes variables included demographic characteristics, comorbidities, and resource utilization and costs.
- Resource utilization and costs were captured from the 1 year time period following the first claim.
- All analyses were conducted using SAS version 9.2.

RESULTS

1. Unadjusted PPPY Costs were calculated for overall costs and by sequelae/comorbidity status in the baseline period.
2. Costs were adjusted using a GLM approach, patients with at least 1 comorbidity were included.
3. Baseline and outcomes variables included demographic characteristics, comorbidities, and resource utilization and costs.

DISCUSSION

- Results from this study represent the first to use claims data to evaluate resource utilization and costs of patients with chronic HCV.
- While the costs associated with HCC are higher than for sequelae, costs associated with HCC are lower than costs in patients with HCC or transplant.

CONCLUSIONS

- Health care costs and resource utilization and costs for patients with chronic HCV are substantial and may vary considerably by associated sequelae/comorbidity. The future health care costs and resource utilization are likely to be underestimated in claims data.
- While the costs associated with HCC are higher than for sequelae, costs associated with HCC are lower than costs in patients with HCC or transplant.

REFERENCES


DISCLOSURES

- All authors have nothing to disclose.

2015 National Summit on HCV and HIV Diagnosis, Prevention and Access to Care in Arlington, VA, June 4-6, 2015.